



CB-LIGHT-8

# EXHIBIT S

# PART 2

ADMISSIONS  
PATIENT ORIENTATION INFORMATION

Welcome to Greystone Park Psychiatric Hospital. We are a Tobacco-free facility. You are in the Admissions Unit and are undergoing the intake process (located at 59 Koch Avenue, Morris Plains, NJ, 07950). The unit provides inpatient psychiatric services for all new admissions who are eighteen (18) to sixty-five (65) years of age, from the Counties of Bergen, Essex, Hudson, Morris, Passaic, Somerset, Sussex, and Warren.

**GPPH Mission:**

In a safe, non-violent and compassionate environment, considering patient input and choice, Greystone Park Psychiatric Hospital provides patients quality care which supports recovery, promotes the highest level of functioning based on individual needs and maximizes their abilities to live, work, socialize and learn within the communities of their choice.

During the intake process you will have a psychiatric evaluation and you will meet your Doctor and Nurse. They will ask you some questions and then the medical doctor will give you a physical examination. You will also be provided with the following information:

- Medication/General Treatment Consent
- Patient Rights/Responsibilities and Advocacy procedures
  - Advanced Directives
- An Important Message from Medicare

At the end of the intake process you will be escorted to your room. We encourage you to personalize your space by displaying personal items.

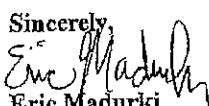
Shortly after you are settled in your room and within 72 hours you will begin to meet your treatment team members. The treatment team consists of a psychiatrist, medical doctor, psychologist, nursing staff, social worker, dietitian, occupational therapist and recreation staff. Your social worker will ask you to sign a release of information / family contact consent form.

During the admission intake process, you will be given information about: hospital wide programs, leisure time activities, hospital staff directory, visiting hours, pay phone number, and a hospital map. This is a lot of information don't worry if you do not remember it all. You can at any time ask the nursing staff questions about hospital procedures, your treatment or request to see your doctor, psychiatrist, social worker and unit administrator.

There is a pay phone available on the unit for your use. If on occasion you need greater privacy than the pay phone location allows, ask your ward staff to assist you with the use of a phone.

You will be treated in this hospital whether or not you can pay. If you have private insurance, Medicare, or Medicaid, the hospital will bill the insurance company first. However, please note that Medicaid does not cover inpatient psychiatric care in a State facility or otherwise eligible individuals unless they are under the age of 22 or over 65. Please be sure to provide insurance information to the hospital. If you do not have insurance, or your insurance does not cover care here, you will be financially responsible. You may also be held financially responsible for any charges incurred for damaging state property. Please note that, for your safety, medication, alternative medicines and / herbal supplements brought into the hospital by you or your family members are not allowed and shall be considered as contraband. They will be removed and discarded.

The staff of the Admissions Unit hopes your stay here is therapeutic and successful. Thank you.

Sincerely,  
  
Eric Madurki  
Acting Hospital Administrator

10/2010

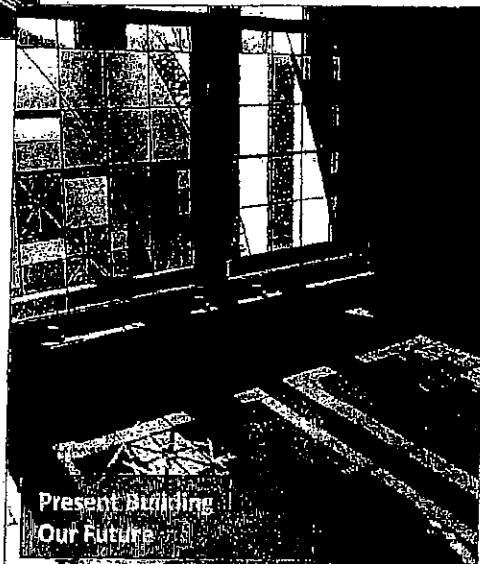
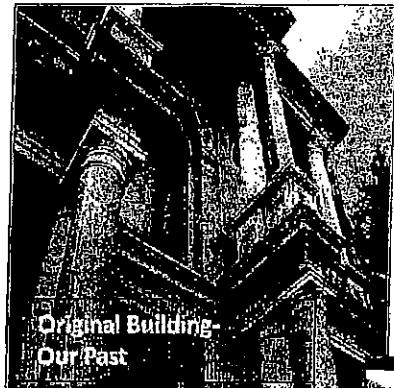
DO NOT FILE IN PATIENT'S CHART

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Greystone Park Psychiatric Hospital

## Family Orientation Booklet

### *Window to Recovery*



Family Education  
Greystone Park Psychiatric Hospital  
59 Koch Avenue, Morris Plains, NJ 07950-4400  
973-538-1800

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Revised: 9/12/08

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## **Introduction:**

### **Every journey needs a guidebook.**

The Family Education and Engagement Committee created this book to orient you to Greystone Park Psychiatric Hospital. Within these pages you will find a description of the hospital, the treatment and discharge process and the treatment units within the facility that opened in 2008.

Take advantage of the resources available to you.

We welcome you to our **Family Education and Support Groups**, now available in English and Spanish, held on the weekend. Our **National Alliance on Mental Illness (NAMI) Chapter, Concerned Families**, meets on the fourth Tuesday of every month and offers the opportunity to meet our CEO as well. During your visits, if your relative's condition permits, consider going to our **Park Place**, a casual, open place to relax. You also can consider visiting the **Greystone Park Association (GPA)** and browsing through the shop, or taking time to enjoy the courtyards.

A vibrant contingent of **volunteers maintains the GPA** and provides other deeply appreciated services. **Consider volunteering** and enriching the day to day life of people in treatment at Greystone.

We need to know about your experience with the hospital.

Please tear off the questionnaire and either drop it off at the front desk or mail it. If you have questions unanswered by our booklet, note it on the questionnaire or call us using telephone numbers provided at the end of this booklet. We thank you for your presence and value your contribution to the lives of the people we serve.

**Greystone Mission Statement**

In a safe, non-violent and compassionate environment, considering patient input and choice, Greystone Park Psychiatric Hospital provides patients quality care which supports recovery, promotes the highest level of functioning based on individual needs and maximizes their abilities to live, work, socialize and learn within the communities of their choice.

**Vision Statement**

Live Recovery.

**Value Statement**

In the pursuit and attainment of our mission every department/discipline will incorporate these values in their day to day operation:

- We recognize the unique worth of each individual. Diversity is valued as a strength of the organization. All individuals will be treated with respect, courtesy, kindness and concern, and, there shall be no discrimination based upon ethnicity, race, color, national origin, religion, age, gender, genderual orientation, disability, financial status or political beliefs.
- We insure that a safe and therapeutic environment of personal and professional growth, learning and accountability is fostered. The hospital has Zero Tolerance for violence. We will use the least restrictive interventions, consistent with safety, at all times.
- We treat all those we serve and each other with compassion and kindness, considering input and choice. Patients receive the best care possible in a manner which promotes patient, family and guardian involvement, and encourages recovery and ongoing wellness.
- We provide services giving first consideration to the needs of patients and their families and guardians.
- We value effective pro-active communication within the organization, with patients, their families, guardians and the communities served.
- We strive for honesty, integrity and fairness in the way we conduct our business.
- We strive to provide the best customer service possible, recognizing that our customers include patients, fellow employees, outside agencies, and all the citizens of New Jersey. Staff shall continuously assess priorities, needs and expectations of community providers, and work collaboratively with them to deliver the full range of services needed by our patients.
- We encourage and expect flexibility, cooperation and adaption to change from all staff

**WELLNESS AND RECOVERY**

All aspects of **daily treatment** at Greystone reflect our employment of **principles of Wellness and Recovery**.

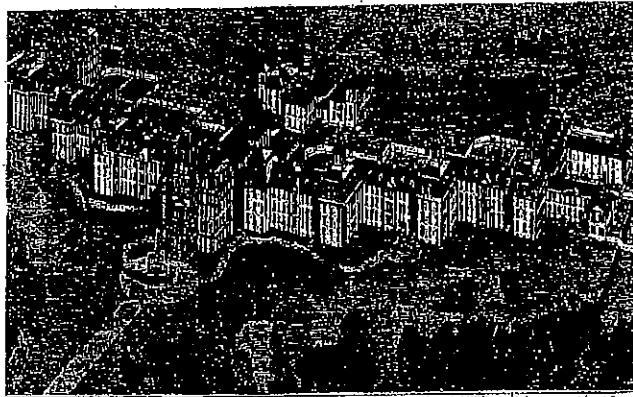
Examples of our efforts are programs which inform patients about psychotropic medications or that support healthy living through improved diet and exercise.

The **wellness and recovery approach considers patients' individual goals and interests as the doorway to effective treatment**. Highlighted strengths help patients find their own motivation to work towards improved health. Symptom management constitutes a part of the overall reconstruction of life and community re-entry, but reclaiming a future includes other interests and needs as well. Your involvement enhances the process through advocacy and consultation.

**Effectiveness of wellness and recovery principles increase when strong teamwork occurs between the patient, hospital, family and community resources.** Collaboration at its best creates an environment of support and enthusiasm for all who participate.

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## Greystone Then and Now



STATE ASYLUM FOR THE INSANE AT MORRISTOWN, N.J.

Greystone Park Psychiatric Hospital (GPPH) opened its doors in 1876. The original hospital building, last used as administrative offices in 2008, had the largest single foundation in the United States until the Pentagon was constructed.

For the period, the building had been considered modern; providing human treatment for the mentally ill. Greystone treated 292 patients in 1876, a census that grew to 7,700 patients in 1947. Changes in the treatment for mental illness as well as available care in the community have reduced our census considerably. Greystone provides inpatients psychiatric services to patients throughout Northern New Jersey.

New Jersey State Laws organize and govern GPPH as a public state psychiatric hospital within the Division of Mental Health Services (DMHS), which operates under the auspices of the Department of Human Services (DHS). The hospital meets standards of the Joint Commission and Centers for Medicare and Medicaid Services (CMS). The hospital, in accordance to its objective, provides quality care and treatment for patients in the least restrictive setting and to ensure patient discharges are a seamless transition to the most clinically appropriate community setting.



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**The hospital's move to the new facility in 2008** completes a process initiated by the state in 2001. The new hospital, considered state of the art, can accommodate 450 patient beds. Many units of the hospital will have cottages as an extension of their treatment area. A total of 9 cottages provide a more open setting as a resource for the units with which they are associates.

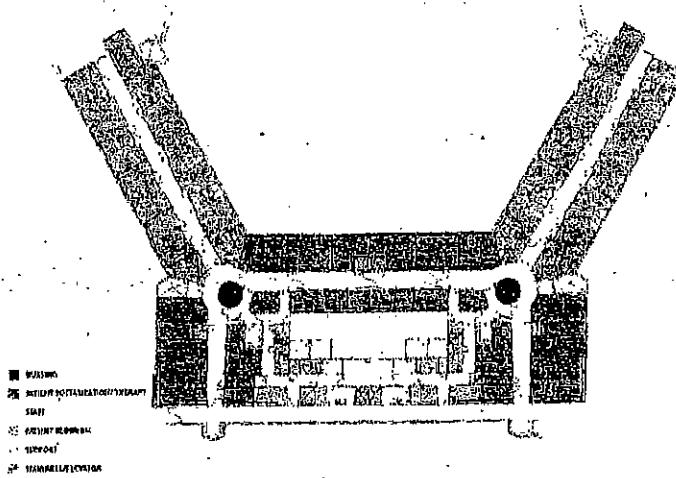


**As of July 8, 2008, the Hospital and its Grounds are "Tobacco Free"**

Smoking on Hospital's property is prohibited. If you have any personal tobacco products on you when your visit your loved ones, please leave it in your vehicle. Cigarettes, lighters or any tobacco products are considered contraband and will be confiscated. Please adhere to State laws and the Hospital's policies.

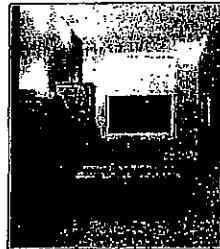
**Greystone's Unit Layout and Programming Areas**

Greystone's treatment units, in our updated facility, have a similar layout. Each unit centers upon a Patient Information Station, with on-unit programming rooms also located centrally. Patients eat in cafeterias located on the unit and have access to fresh air through balconies. Central living areas for relaxation are also available. Each unit was designed to allow for flexibility in allowing for two adjoining units to be open to each other for team approved activities.

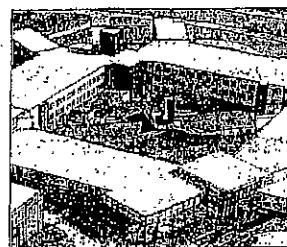


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**Patient Bedrooms** – On each unit there are 13 semi-private patient bedrooms that each has their own personal closet, desk and bulletin board to post information, pictures and other articles of interest. Each room has a bathroom shared by the patients in that room. Clothes can be washed in washers and dryers on the unit.



For patients that are clinically stable, there are programs available in a centralized location called the J-Wing. All disciplines provide programs there. Patients can go on their own, or if need be, the unit staff will escort them. Those patients who need closer supervision in treatment will have access to interdisciplinary treatment on the unit.



## Frequently asked questions:

**I saw something while visiting here that I don't think is safe, what do I do?**  
Tell the nurses or other treatment team members working with your relative. Also, call our Safety Department at extension 5299.

**What is the Greystone Park Association (GPA) and can I join?**  
The Greystone Park Association, Inc. auxiliary to the Greystone Park Psychiatric Hospital is a non-profit organization which runs entirely on the support of volunteers. Because almost all volunteers are either family members or GPPH retirees, the GPA represents the very heart of those who rejoice in patients progress and wish them well as they leave the hospital. The GPA has a thrift shop which sells everything from clothing to household items second hand. You might want to stop in and check out the bargains! 100% of funds raised by the GPA are devoted to providing special things to patients including outings, a package of hospitality items for those just admitted, grooming items, money for special projects and anything else not funded by the state. Patients can also get clothes there and are even given luggage and other items need from the GPA when they are discharged.  
**Please consider contributing your time to this wonderful organization of resilient and committed volunteers. Call 973-538-1800 ext. 5245, the auxiliary at 973-889-0170 or come to the office in the building, not far from the entrance.** Remember to make the GPA your first stop for clothing, household items and even appliance donations.

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**Frequently asked questions cont'd**

**My relative smokes but wants to stop, how can the hospital help him?**

Congratulations to your relative for deciding to ask for help in quitting. The hospital has a number of resources: support through the Healthy Living programming, and relief from the physical and emotional symptoms that can be experienced while quitting. If your relative is having a difficult time due to the recuperation from smoking cessation, please make sure that the medical doctor and nursing staff are aware so that we can assist and treat the difficulties experienced. If you smoke, respect that others may be working towards quitting. Thank you for your contribution.

**Can patients use the telephone or receive mail?**

Patients have the right to use pay phones for outside calls. Patients also have the right to both receive and send mail. Only administrative and clinical personnel may officially deny these rights for a patient under special circumstances, such as when they lead to adverse clinical effects.

**Did the telephone number change?**

No. Our telephone number continues to be 973- 538-1800.

**Have phone extensions and address changed?**

Yes, phone extensions will be different but our address changed because postal service for Greystone comes out of Morris Plains. Our new address is on the outside of this booklet: 59 Koch Avenue, Morris Plains, NJ 07950-0440.

**Can patients drink caffeinated beverages?**

Physicians can restrict a particular patient's access to caffeine if its use would be contraindicated by the patient's clinical condition. A doctor would then order restriction of caffeine use. Appropriate patient and family education will be provided in order to allow the patient and his/her family to understand the reason for and importance of any imposed caffeine restriction.

**What is the visitation policy?**

The hospital encourages patients to have visitors to foster family relationships and community connections. Try to schedule your arrival around visiting hours and work around the patient's treatment programs. You can call the unit and ask about your relative's planned activities for the day. Children below age 12 will require different visiting arrangements; you can coordinate through the Hospital Administrator or designee. For the safety of all in the hospital, please be prepared for all packages to be checked by security and/or staff upon entry of any building.

**What does the security guard at the entrance to the hospital do?**

The security guard will issue your visitor badge. The guard will also call the unit to announce your visit and will give you directions to reach the unit. We rely on the security guard to ensure accountability of all people who enter and leave the hospital.

**How will my relative have access to funds for personal use?**

Each patient can maintain a patient account here at Greystone. We encourage each patient to spend independently and emphasize budgeting skills. If you want your relative to receive funds from you, please make a deposit in the personal account assigned using a check or money order. Please do not send cash.

**What can my relative buy at the hospital for personal use?**

Patients at Greystone can buy snacks at Park Place and useful items through the Greystone Park Association.

**Why do I see signs about an electronic surveillance system?**

In order to promote the safety and protection of patients and staff, an electronic surveillance system has been installed to aid in documenting, investigating, evaluating and tracking unusual events or occurrences. Cameras are not positioned in areas designated for patient or staff's health or personal comfort, such as bedrooms and bathrooms.

**What Pastoral and Religious Services are available to my relative?**

Chaplains are clinicians who have the highest professional competency and ethical practice. Chaplains believe that faith is an essential part of our wholeness. They believe in the dignity and worth of all persons and therefore, they celebrate the exclusivity and diversity of all, while at the same time taking care of the spiritual needs of the entire community. With that, Chaplains are members of the treatment teams, advocate for patients, as well as do individual counseling for patients, as they work through their questions of spirituality and faith. Patients can participate in Spirituality groups that work on issues such as hope, healing, trust, guilt, fear and acceptance, as well as attend religious services. Patients can ask their treatment team to refer them for Pastoral Care.

**How are Ethical concerns addressed at Greystone?**

The Hospital Ethics committee at Greystone provides a forum whereby clinical decisions are discussed, conflict resolutions are addressed and recommendations are made. Its role is advisory to staff, patients and patients families. The committee reports to the Executive Management Committee and is accessible to all of the above described individuals as well as other health care providers.

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The Ethics committee takes a comprehensive approach for protecting the dignity, privacy, and respect of the patient, patient's family and health care professionals. It also ensures that business relationships with the public and other health care providers are conducted in an ethical manner.

**How can patients or their relatives have a concern about treatment rights, privacy or confidentiality of information heard by the ethics committee?**

Yes. You must put the question in writing and use the referral form available on the unit. The form advises the writer that decisions are held in confidence, that agreement and consensus may not occur, and that a report of the consultation will be sent to team members involved. You will have to describe the reason for the consultation; what is the situation or dilemma faced by the person making the referral? You will then list questions you want addressed by the committee. All referrals will go to the Ethics Committee chair person.

A written request must be sent in writing to:

Chair, Ethics Committee  
c/o Office of the CEO  
59 Koch Avenue  
Morris Plains, NJ 07950-4400

**Levels of Supervision: What they are and your relative's ID:**

Levels of supervision (LOS) refer to the clinical decision by the treatment team about how much a patient needs to be supervised. The levels range from Level One to Level Four. Your relative's LOS will be reflected in the ID worn inside the hospital and carried for day or brief visit passes using a color coding system.

**Level of Supervision I:**

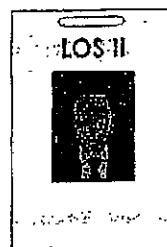
On unit only.

Escort off only for prescribed treatment not available on the unit.



**Level of Supervision II:**

Escort to programming off unit.  
Family home visits only at team discretion.



**Level of Supervision III:**

Unescorted attendance to programs on grounds. Brief home visits allowed after meeting with team.



**Level of Supervision IV:**

Allows for attendance to team approved off-grounds activities. Level Three can allow if team permits.



### Treatment Teams

#### **What is a treatment team and who are the members?**

Each patient's treatment is planned by an interdisciplinary treatment team. The plan is reviewed in a meeting called a 'treatment team meeting'. The team also meets to discuss significant events or can meet just to see a family member. A treatment team comprises of a psychiatrist, a nurse, nursing staff member (one to one with the patient), a social worker, a medical doctor, a psychologist, a rehabilitation staff member, and dietitian. A Clinical Nurse Specialist can also be present as an additional resource.

#### **Will my relative be able to have a say in the treatment plan?**

We believe that our efforts to effectively assist a patient depend upon our ability to integrate your relative's goals and interests into the plan developed. Our efforts would be reflected in the activities, groups in the daily schedule, and medicine prescribed. Recognized treatment needs assessed by the team are discussed with each patient as a part of the process. The wellness and recovery paradigm adopted by New Jersey's mental health system considers hospitalization as part of the continuum of managing needs presented by mental illness with the goal of preparing for discharge.

#### **When does the treatment team meet?**

A treatment team meets at designated times throughout a patient's hospitalization, meetings are held during a 'protected time' from 11 am to 12 pm each day for team meetings. A patient will be seen within 24-72 hours of admission and a comprehensive treatment plan will be developed by the tenth day of admission. Additional meetings will be then held at 30 days and 60 days from that tenth day. Meetings will then be held every 60 days for the first year and every 90 days thereafter. If a patient is under the age of 22, he/she will meet with the treatment team every 30 days.

#### **Can I participate?**

You will need permission from a patient to attend that person's treatment team meeting. Please see the section about confidentiality should you have questions. If you want to attend a treatment team, call and alert the social worker or any member of the team about your intentions. If transportation is a problem for you, ask if you might participate via speaker phone. If you are not allowed to attend, you can write to a team member or call.

#### **What is my role in a treatment team meeting?**

We would want to ask you about treatment history as well as discuss your past experiences and your expectations of treatment and discharge. We also would like to take the opportunity to answer any questions you may have. It may be helpful to you to use the 'organizer' on the next page.

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### My Personal Notes for Meeting with the Treatment Team

#### Meeting Date & Time:

Treatment Team Member	Name	Greystone Phone Number (973) 538-1800 Treatment Team Member's Extension
Psychiatrist		
Medical Doctor		
Psychologist		
Social Worker		
Nurse		
Clinical Nurse Specialist		
Rehabilitation		
Direct Care Staff		
Nutritionist		

1. These are my the questions about treatment (medication, therapy, activities, you can include concerns about medical issues, rehabilitation):

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2. My questions about the discharge plan:

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3. The Treatment Team should know the following about in order to provide the most successful treatment and discharge plan:

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4. My opinion about Brief Visits to myself or other family members/friends is:

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5. I want the following information about Intensive Family Support Services in my community:

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6. Please tell me my contact information as listed in the chart, I may need to correct it.

### **Improving Communications: For Families with a Relative in Recovery**

Coping with mental illness can present an overwhelming set of challenges. Learning more effective communication techniques will help your friend/relative to maintain positive interactions.

#### **These are Communications that CAN work!**

You find some truth in what the other person is saying, even if you feel they may be wrong, irrational, or unfair.

Examples:

"I can see why you'd be upset with me, if you thought I didn't care about your money."

"Anyone might be upset under those circumstances."

"You're right. [Say how.]"

You see the world through the other person's eyes.

Examples:

"Let me see if I understand what you are saying ... [restate their ideas]"

"I imagine you might be feeling pretty scared, is that right?"

You ask gentle, probing questions to learn more about what the other person is thinking and feeling. Examples:

"Can you tell me more about that?"

"And then how did you feel?"

"What did you think might be going on?"

You express yourself with I statements rather than with YOU statements

Examples:

"I feel confused about what you're telling me" vs. "You are not making any sense!"

"I remember our conversation differently. Can I tell you how I remember it?" vs. "You are wrong. You always twist my words!"

You find something genuinely positive to say to someone, even in the heat of battle. You express respect for them, even if you may be angry with each other. Examples:

"I'm glad you decided to tell me how upset you are, rather than keeping it inside."

"You have been very clear in how you expressed yourself."

**These are Communications that DON'T Work!**

"You did so leave a mess. I will take a picture and show it to you!"

"No I will not help you. Yesterday you were very rude when you wanted your dinner..."

"It's fine for you to stomp and curse, but you don't like it when I do it, do you?"

(Giving the silent treatment) or (Yelling) "I am not angry!"

"You'd better show me more respect than that; I am your (mother/father/whatever)

"I've given you the best years of my life - look at the thanks I get!"

The ideas here are from David Burns' book, "The Feeling Good Handbook," and are covered in greater detail at the **Wednesday Evening Family Group** that meets on the first and third Wednesdays of the month from 5:30pm to 7:00 pm. For details, call GPPH Social Services: (973) 292-4068.

### **Types of treatment provided at Greystone:**

#### **Therapeutic Programming**

Patients have individualized schedules which can include group therapies provided by all disciplines of the hospital, as well as off unit activities which are meant to maintain and enhance abilities that can be helpful upon return to the community. All disciplines offer groups relevant to the presenting needs of the patients on a unit. The treatment team will work with a patient to select the most appropriate groups and off-unit activities.

Off-unit activities can include Vocational Rehabilitation to assess and maintain work skills or Activity Therapy programs meant to channel energy and interests in arts, crafts, music, dance, and sports. For patients who are under 21, without a high school degree, there is an Academic Education Program provided on the unit as well as on grounds towards earning a high school diploma. There is also a program on grounds for patients who need to learn how to recover from mental illness and substance abuse.

#### **\*Medications**

Medications prescribed by medical doctors or psychiatrists aid patients with symptoms that they experience which intrude or impede the ability to function. Below you can find a simple guide of five major classes of medications used by psychiatrists. Medications prescribed on the Unit for medical conditions, you can consult with the medical doctor assigned to the unit.

#### **\*NOTE:**

*Medications brought into the hospital by patients, patients family, physician or other sources are prohibited. Patients are only allowed to take medications prescribed/dispensed by the hospital.*

**Anitipsychotic medications** are used to treat psychotic symptoms such as perceptual disorders (hallucinations), thought disorders (delusions), and severe agitation.

Some Antipsychotic medications are: Thorazine, Prolixin, Trilafon, Haldol, Navane, Loxitane, Clozaril, Risperdal, Zyprexa, Seroquel, Geodon, and Abilify.

**Antidepressant medications** are used to treat symptoms of depression such as increased sleepiness, decreased or increased appetite, weight gain or loss, social isolation, poor grooming, slowed movements, fearfulness, and suicidal feelings.

Some Antidepressant medications are: Ludomil, Elavil, Pamelor, Tofranil, Deseryl, Effexor, Wellbutrin, Serzone, Remeron, Luvox, Paxil, Celexa, Zoloft, and Prozac.

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**Mood Stabilizers and Anticonvulsant medications** are used to treat symptoms of mania (which can be part of bipolar disorder) such as pressured speech, flight of ideas, hyperactivity, insomnia, grandiose ideas, distractibility, and agitation.

Some Mood Stabilizers and Anticonvulsant medications are: Lithium, Tegretol, Depakote, Lamictil, Neurontin, and Topamax.

**Anti-Anxiety medications** are used to treat symptoms of anxiety such as palpitation, sweating, trembling or shaking, shortness of breath, dizziness, fear of losing control, fear of social situations, and nervousness.

Some Anti-Anxiety medications are: Vistaril, Benadryl, Xanax, Klonopin, Valium, Ativan, and Buspar.

## **Discharge Planning**

### **How is discharge planned?**

- Discharge planning begins as soon as a patient is admitted to GPPH. Patients may be discharged as soon as they are stabilized, off high risk precautions and participating in their treatment. They must have an appropriate place to live, financial support, and aftercare arranged. The patient should be agreeable to the discharge plan.
- For those patients who cannot return home, residential programs will be explored. The social worker collaborates with the treatment team and the patient as the plan progresses. If you have questions about the discharge plan for your relative or friend, call the social worker.

### **Where do patients get discharged?**

Patients may be discharged to their families or to an independent living situation. Patients may also go to group homes, which can provide anywhere from 4 to 24 hours of supervision, depending on the facility. There are also housing programs which will provide a client with their own apartment with support services. Other types of housing can include boarding homes or residential health care facilities.

### **What kinds of aftercare will they have and how will it be paid for?**

Depending on your friend / loved one's treatment needs and health insurance coverage, aftercare can include a day program or outpatient psychiatric care.

### **What role can I play in discharge planning?**

1. Inform the team of how your friend or relative has responded to past treatment and discharge arrangements. We are especially interested in learning what worked, what did not work and why.
2. If your friend or relative has not given consent for you to attend a treatment team meeting, you can send a letter to a treatment team member or to the complex administrator to share information. Please refer to the section about confidentiality on page 24.
3. Encourage your relative or friend to make responsible choices in the treatment and discharge process. We encourage our patients to take responsibility for their recovery and play an active role in their treatment.

## **Bridge to the Community: Patient/Consumer Outreach & Education**

Mental Health Consumers (many with a history of hospitalization) who live successfully in the community can offer an effective role model and educate patients about the experience of being discharged. Greystone has pioneered the initiation of programs that directly connect patients to consumers from their local counties. This ongoing exchange occurs when patients participate on a voluntary, regular basis in Consumer Conferences,

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Education Projects and Community Events. They also visit their County Self-Help Centers. A weekly educational program led by consumers/patients takes place on all units. Topics include wellness and recovery as well as community re-entry.

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### **Greystone Family Education and Supports**

"Resilience is the ability to withstand and rebound from disruptive life challenges strengthened and more resourceful." –Froma Walsh

You are invited to use the below described resources for education, support and advocacy. You may also develop tools for response to challenges presented in the process of diagnosis and treatment of mental illness within your family.

#### **Family Education and Support Group**

This bi-weekly, eight session group allows families and experienced GPPH clinicians to meet and share information, support, and practical help in coping with the illness of a friend / loved one.

Topics include:

- Information about GPPH
- Wellness and Recovery (GPPH mission statement)
- Mental Illness and Medications
- Treatment Team Process
- Preparing for Discharge
- Communication Skills/Problem Solving
- A Look at the Future

The group will be meeting in a room close to the entrance. Come, learn and get necessary support!

#### **Concerned Families**

**Concerned Families, our on-grounds NAMI chapter,** meets in the evening, on the 4th Tuesday of each month in the Hospital's H-Wing, 2nd Floor, Conference Room H-204. This meeting starts at 5:00 p.m. and is an opportunity for families to meet the hospital's CEO in addition to learning about efforts NAMI makes to advocate for the mentally ill on a county, state, and national level. The meeting is facilitated by a family member of a consumer. Please call the CEO's office to get further information by calling 973-889-4570.

**COMMUNITY FAMILY SUPPORT SERVICES:**

**Intensive Family Support Services (IFSS):**

IFSS, based in each county, provides information and support to families about how to locate appropriate resources and how to cope with a relative's chronic mental illness. Services include:

**Information and Referral:** Directories, articles, and brochures about mental illness are available, in addition to treatment, respite and housing options. There is information regarding legal and financial programs. Staff is available to talk with families to explore ways to meet their particular needs.

**Consultation and Education:** Individual or family guidance with a mental health professional can be accessed by phone and in person.

**Support Groups:** Ongoing support groups for families of people with mental illness provide opportunities to share and problem-solve with families coping with similar situations.

**Respite Care:** Temporary care for a mentally ill individual to allow the primary care giving relative to get a break. This is only available in some counties, please call for more information.

**ABOUT NAMI NEW JERSEY:**

NAMI NEW JERSEY is a statewide non-profit organization focusing on improving the lives of individuals and families who are affected by mental illness.

NAMI NEW JERSEY also provides education, support and systems' advocacy to empower families as well as persons with mental illness. Local affiliate self-help and grassroots advocacy groups are located in each county. Some services offered are: emotional support, information and advice about treatment and community resources, and advocacy. NAMI offers the above services in Spanish as well.

NAMI NEW JERSEY  
1562 Route 130, North Brunswick, NJ 08902  
Phone: (732) 940-0991  
Fax (732) 940-0355  
[www.namini.org](http://www.namini.org)

**THE JOINT COMMISSION WANTS YOU TO KNOW**

The Joint Commission on Accreditation of Healthcare Organizations wants you to know that should you have any concerns about patient care and safety in the hospital, and if the hospital has not addressed your concerns, you are encouraged to contact the Hospital's Management. If your concerns cannot be resolved through the Hospital's Management, then you are encouraged to contact the Joint Commission at: 1-800-994-661.

**INFORMATION BELOW TAKEN DIRECTLY FROM NAMI WEB SITE:**

For more information go to: <http://nj.nami.org/support/ifss.html>. Please note that contact names can be subject to change so ask for the agency's IFSS program director if the person you call is no longer there.

INTENSIVE FAMILY SUPPORT SERVICES			
County	Address	Contact Names	Phone/Fax Numbers
Bergen	CompCare (Comprehensive Behavioral Healthcare, Inc.)-IFSS 395 Main Street Hackensack, NJ 07601	Nadine Venezia, Family Support Specialist	201-646-0333
Essex	Mental Health Association of Essex Family Resource Center 33 South Fullerton Avenue Montclair, NJ 07042	Marvin Gorsky, Program Director	973-509-9777
Hudson	Catholic Community Services Mt. Carmel, IFSS 3040 Kennedy Boulevard Jersey City, NJ 07306	Anna Morel, Program Manager	201-798-9938
Morris	St. Clare's Hospital Behavioral Health Center-IFSS 50 Morris Avenue Denville, NJ 07834	Rosaelena Klingener, Program Coordinator	973-625-7095
Passaic	Mental Health Association of Passaic County - IFSS 404 Clifton Avenue Clifton, NJ 07011	Anabel Lago, Program Director	973-478-4444
Sussex	Saint Clare's Hospital/ Linn House 20 Walnut Street Sussex, NJ 07461	Carrie Gibney, Family Specialist	973-702-2741
Warren	The Family Guidance Center of Warren County - IFSS 492 Route 57 West Washington, NJ 07882	Suzette Reilly, Program Specialist	908-689-1000, Ext. 22

Report Safety Concerns to the Unit Treatment Team or to the Safety Department at extension 5299

**Confidentiality**

New Jersey Statutes 30:4-24.3 and the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") Privacy Rule

**Background**

Since at least 1965, New Jersey has required that all medical records of a person's treatment in a psychiatric facility be strictly confidential.

Confidential means that the patient, unless declared incompetent by a court and assigned a guardian, retains the right to control who has access to that information. The Privacy Rule defined under HIPAA expanded this kind of confidentiality to all health care across the United States, and "covered entities" under HIPAA include health plans, health care clearinghouses, and health care providers. For HIPAA purposes, the Department of Human Services which oversees this hospital is covered. Under both laws, we must keep confidential any information about an individual that identifies them and is transmitted or maintained by us. We are permitted to use or disclose information as needed to provide treatment, to receive payment, and administrative operations. We may disclose information if ordered to do so by a court or if the patient authorizes the disclosure.

**Why am I told that Greystone employees need 'permission' to talk to me?**

The Privacy Rule states that a facility must obtain valid written authorization from the client or his/her guardian before it may use or disclose a client's health information. If a family member or friend requests information, we can release information about location and general medical condition if the patient is too sick to be consulted, and there are a few exceptions for ongoing investigations, national security, and sharing with other parts of the mental health system and government regulators. In general, we must obtain an authorization or court order for disclosures.

**How can I get the information and answers I need?**

Talk to the client's social worker about obtaining written permission from the client or his/her guardian. If you are a relative, friend, or the client's personal physician or attorney, you may inquire about the client's current medical condition without authorization. However, if the client objects to that disclosure, you may still not receive the information. If the information is needed for an ongoing legal case or dispute, speak to your attorney or the judge in the case about obtaining the information with a court order.

**Am I not allowed to talk about the patient/client's psychiatric treatment?**

Unless you are a covered entity under HIPAA, you are bound to keep confidential anything you might know about the patient/client's medical or psychiatric treatment or condition. Under state law, if you have copies of any papers generated at the hospital, you should not share them without the consent of the client or a court order. In general, information about psychiatric treatment should be kept private because of the many misperceptions and prejudices that affect consumers. If you have access to information about a client, we recommend you communicate it to professionals and others who have some legitimate reason to have the information.

### **Patients' Bill of Rights**

Title 30 of the New Jersey Statutes contains various laws that guarantee particular rights to people who receive mental health services from the State, including that no patient shall be deprived of any civil right solely by reason of his or her receiving treatment. The law provides that within five days of admission, every patient shall receive written notice of the rights to which they are entitled. If a patient cannot read, these rights are to be read aloud to them. If the patient cannot read or understand English, the rights must be provided in a language or means of communication they understand. If the patient is an un-emancipated minor or has been adjudicated to be incompetent, a copy of these rights will be given to the patient's guardian with the same accommodation for disability or language difference. Receipt of this notice is to be acknowledged by the patient or legal guardian and a copy shall be placed in the patient's chart. If a patient or guardian refuses to acknowledge receipt of the notice, the law requires that this fact be documented.

Absolute rights are rights that cannot be denied under any circumstances. Other rights will only be denied for reasons having to do with your recovery or treatment. Questions or complaints about rights can be directed to the treatment team, the Client Services Representative, an attorney, or New Jersey Protection and Advocacy.

#### **THE PATIENTS' BILL OF RIGHTS**

1. **You have an absolute right** to be free from unnecessary or excessive medication. If you are or become a voluntary patient, you may refuse all medications and treatments.
2. **You have an absolute right** not to be subjected to experimental research, shock treatments (ECT), sterilization, or psychosurgery without your express and informed written consent after consultation with an attorney or advocate.
3. **You have an absolute right** to be free from physical restraint and isolation unless an emergency situation requires that you be restrained or secluded in the least restrictive manner appropriate to the situation.
4. **You have an absolute right** not to be hit, kicked, or otherwise physically punished by staff.
5. **You have an absolute right** to communicate with your attorney, physician or the courts. An attorney will represent you in any proceeding relating to your commitment or admission. If you are unable to afford an attorney, the State will provide one to represent you.

6. You have an absolute right to participate in your treatment plan to the extent your condition permits your participation and to have examinations, services, and a verbal explanation of the reasons for your admission and any medical information provided in your primary language or other means of communication.
7. You have an absolute right to education and training suited to your age and attainments, if you are between the ages of five (5) and twenty (20).
8. Your rights to register and vote, or to hold or enjoy any license, permit, privilege or benefit pursuant to law shall not be denied, modified, or varied because you are receiving evaluation or treatment for mental illness.

You also have the following rights, which are not absolute, but they will only be denied to you for good cause. If they are denied to you for good cause, you (and your guardian if you have one) and your attorney will receive a written notice stating why and for how long each right will be denied (up to 30 days with renewals of up to 30 days each so long as the denial is necessary):

1. To privacy and dignity.
2. To the least restrictive conditions necessary to achieve the purpose of treatment.
3. To wear your own clothing, to keep and use your personal possessions, and to keep and be allowed to spend a reasonable sum of your own money.
4. To have access to individual storage space for your private use.
5. To see visitors each day.
6. To have reasonable access to and use of telephones both to make and receive confidential calls.
7. To have ready access to letter-writing materials, including stamps, and to mail and receive unopened correspondence.
8. To regular physical exercise several times a week.
9. To be outdoors at regular and frequent intervals, so long as your medical conditions permit.
10. To suitable opportunities for interaction with members of the opposite sex, with adequate supervision.
11. To practice the religion of your choice or to abstain from religious practice.
12. To receive prompt and adequate medical treatment for any physical ailment.
13. To petition a court to review whether you are being legally detained (file a writ of habeas corpus) or to enforce any other right through a civil action, whether stated in this notice or otherwise available by law.

Report Safety Concerns to the Unit Treatment Team or to the Safety Department at extension 5299

To the protection of your confidentiality, especially with respect to written records of your treatment, in general, your records or any information about your treatment cannot be shared, except with those involved in your care or treatment, without either your authorization or the order of a court. You will be provided with an attorney unless you choose to hire your own attorney. Your attorney will assist you in understanding and enforcing any rights guaranteed to you by law, and will represent you at regular judicial reviews of your commitment or admission that will be provided pursuant to state law.

While you are an involuntary patient, you have a limited right to refuse to take psychotropic medication, and to have that medication order reviewed before you are required to take the medication.

If you feel you have been denied any of these rights improperly, call the hospital Client Services Representative or your lawyer. The Client Service's Representative number is 1-888-670-6408.

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**HOSPITAL ADMINISTRATION DIRECTORY**

Please use this hospital-wide Staff Directory if you have any questions or comments. The hospital's main number is 973-538-1800. Extensions below reflect the new five digit extensions. To direct questions to the Office of the Chief Executive Officer use the following numbers:

**Executive Administration**

Chief Executive Officer - Janet Monroe, Ext. 4570  
Deputy Chief Executive Officer - William Clayton, Ext. 4568  
Chief Operating Officer - John Whitenack, Ext. 4569

For questions concerning patient psychiatric or medical treatment, use the following numbers:

**Clinical Administration**

Clinical Director - Jeffry Nurenberg, M.D., Ext. 4574  
Director of Medicine - Milton Luria, M.D., Ext. 4577  
Director of Psychiatry - Robert Becker, M.D., Ext. 4576

For specific Unit Hospital Administrators or clinical questions regarding patient care areas, use the following numbers:

**Unit Administration**

**Raymond Gray, Hospital Administrator for Area 1, Ext. 4395**  
(Units: D1, E1, F1, G1 and Cottage 16)  
**Willis Parker, Hospital Administrator for Area 2, Ext. 4397**  
(Units: D2, E2, F2, G2 and Cottages 18-19)  
**Ross Friedman, Hospital Administrator for Area 3, Ext. 4398**  
(Units: A3, B3, D3, E3, F3, G3 and Cottage 20)  
**Louis Cassaro, Hospital Administrator for Area 4, Ext. 4391**  
(Units: Admissions: A1, B1, A2, B2 and Cottage 14)

For specific discipline program questions use the following numbers:

**Discipline/Department Heads**

Director of Pastoral Services - Rev. Emily Hall, Ext. 4920  
Director of Psychology - Jane Daniel, Ph. D., Ext. 4578  
Director of Social Services - Roberta Braithwaite, Ext. 4929  
Director of Nursing - Tanners Mollett, Ext. 4934  
Director of Rehabilitation - Gene Daquila, Ext. 4579  
Director of Nutrition Services - Paz Chua, Ext. 4921  
Director of Quality Management - Vilma Berry, ext. 4932

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**Unit Payphone Numbers and Cottage Payphone Numbers**

<b>Area 1:</b>	<b>Area 2:</b>	<b>Area 3:</b>	<b>Area 4:</b>	
D1 973-540-9165	D2 973-540-9167	A3 973-540-9384	A1 973-540-9069	
E1 973-540-9175	E2 973-540-9182	B3 973-540-9163	B1 973-540-9141	
F1 973-540-9208	F2 973-540-9212	D3 973-540-9169	A2 973-540-9084	
G1 973-540-9242	G2 973-540-9251	E3 973-540-9201	B2 973-540-9159	
C-16 973-455-9135 & 16 973-984-9814	C-18, 19 973-455-9864 973-455-9007	F3 973-540-9236	C-14 973-455-9083	
		G-3 973-540-9259		
		C-20 973-455-9650		

If you are unable to reach your loved ones, please free to reach them at the Nurses' Stations:

<b>Area 1:</b>	<b>Area 2</b>	<b>Area 3</b>	<b>Area 4</b>	
D1 4601, 02, 03	D2 4627, 28, 29	A3 4285, 86, 87	A1 5751, 52, 53	
E1 4753, 54, 55	E2 4778, 79, 80	B3 4503, 04, 05	B1 4431, 32, 33	
F1 4834, 35, 36	F2 4873, 74, 75	D3 4654, 55, 56	A2-Deaf 4251, 52, 53	
G1 5146, 47, 48	G2 5168, 69	E3 4799, 4801, 02	B2 4470, 71, 73	
C-16 4862	C-18, 19 4864, 4867	F3 4905, 06, 07	C-14 4840	
		G3 5195, 96, 97		
		C20 4868		

**Regular Visiting Hours:**

For all locked units, the visiting hours are, 1PM-3PM and 6PM-8PM daily.

**Mountain Meadow Complexes: 14, 16, 18, 19, 20**

Monday-Friday 4PM – 8PM

Weekends & Holidays 1PM – 8PM

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QUESTIONNAIRE

Date:

Please note any information about your name, address, or relative is entirely optional.

Name:

Address:

Telephone:

1. This booklet satisfied:

- a) All of my questions
- b) Most of my questions
- c) I still have questions

2. How could this booklet be improved?

3. The Family Education and Support Group has been moved to the weekend. Is this convenient for you?

- a) Yes
- b) No

4. Were you able to find the Greystone Park Association, which is close to the main entrance?

- a) Yes
- b) No

Did you know you can call 973-889-0170 to join?

- a) Yes
- b) No

5. Would you like more information about the NAMI chapter that meets at GPPH the fourth Tuesday of the month?

- a) Yes
- b) No

6. Have you seen anything that causes you concern in terms of safety?

If so, we need to know, please contact either your relative's unit or Safety at ext. 5299.

7. My overall satisfaction with my relative's treatment is:

- a) Very good
- b) Good
- c) Please contact me, I have strong concerns

Please return this completed questionnaire at the Front Desk or mail it to:

Quality Assurance  
Family Education  
Greystone Park Psychiatric Hospital  
59 Koch Avenue  
Morris Plains, NJ 07950-4400

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